PINE VIEW CARE CENTER

400 CTH R

BLACK RIVER FALLS 54615 Phone: (715) 284-5396		Ownership:	County
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/03):	135	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/03):	141	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	115	Average Daily Census:	114

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (	12/31/03)	Length of Stay (12/31/03)	%	
Home Health Care Supp. Home Care-Personal Care	No No	   Primary Diagnosis 		Age Groups 	\{\bar{\}}	   Less Than 1 Year   1 - 4 Years	27.8 41.7	
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65	3.5	More Than 4 Years	20.9	
Day Services Respite Care	No No	Mental Illness (Org./Psy)   Mental Illness (Other)		65 - 74   75 - 84	10.4 39.1	•	90.4	
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	41.7	* * * * * * * * * * * * * * * * * * *	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.9	95 & Over		Full-Time Equivalent		
Congregate Meals No				•		-   Nursing Staff per 100 Residents		
Home Delivered Meals		Fractures				(12/31/03)		
Other Meals	Yes	Cardiovascular	8.7	65 & Over	96.5			
Transportation	Yes	Cerebrovascular	17.4			RNs	11.8	
Referral Service	No	Diabetes	0.9	Gender	용	LPNs	5.3	
Other Services	No	Respiratory	7.8			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	33.0	Male	22.6	Aides, & Orderlies	55.3	
Mentally Ill	No			Female	77.4			
Provide Day Programming for			100.0					
Developmentally Disabled	No				100.0			
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## Method of Reimbursement

		Medicare			edicaid itle 19			Other		:	Private Pay	:		amily Care			Managed Care			
Level of Care	No.	90	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	왕	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	90	Per Diem (\$)	No.	olo	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	1	1.3	134	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	0.9
Skilled Care	7	100.0	307	68	86.1	115	0	0.0	0	23	82.1	137	0	0.0	0	1	100.0	267	99	86.1
Intermediate				10	12.7	96	0	0.0	0	4	14.3	124	0	0.0	0	0	0.0	0	14	12.2
Limited Care				0	0.0	0	0	0.0	0	1	3.6	117	0	0.0	0	0	0.0	0	1	0.9
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		79	100.0		0	0.0		28	100.0		0	0.0		1	100.0		115	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/03
Deaths During Reporting Period		 			% Needing		Total
Percent Admissions from:		   Activities of	%		3	% Totally	Number of
Private Home/No Home Health	8.7	Daily Living (ADL)	Independent	One	or Two Staff	Dependent	Residents
Private Home/With Home Health	0.8		0.0		61.7	38.3	115
Other Nursing Homes	3.2		9.6		65.2	25.2	115
Acute Care Hospitals			25.2		54.8	20.0	115
Psych. HospMR/DD Facilities			21.7		40.0	38.3	115
Rehabilitation Hospitals	0.0	Eating	59.1		29.6	11.3	115
Other Locations	8.7	*********	*****	*****	*****	******	*****
otal Number of Admissions	126	Continence		용	Special Treatmen	ts	용
ercent Discharges To:		Indwelling Or Extern	al Catheter	3.5	•	iratory Care	14.8
Private Home/No Home Health	35.1			60.0	Receiving Trac		0.0
Private Home/With Home Health	9.2			18.3	Receiving Suct		1.7
Other Nursing Homes	2.3					my Care	1.7
Acute Care Hospitals	14.5	Mobility			Receiving Tube	-	1.7
Psych. HospMR/DD Facilities		·	ed	4.3		anically Altered Diets	37.4
Rehabilitation Hospitals	0.0						
Other Locations		•			Other Resident C	haracteristics	
Deaths	32.1	•		5.2	Have Advance D	irectives	72.2
otal Number of Discharges		With Rashes		7.0			
(Including Deaths)	131					hoactive Drugs	67.8

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:			
	This	Government		100	-199	Ski	lled	Al	1	
	Facility	Peer	Peer Group % Ratio		Group	Peer Group		Faci	lities	
	%	8			% Ratio		Ratio	8	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	80.9	87.6	0.92	84.0	0.96	84.0	0.96	87.4	0.92	
	88.7		1.15	80.7	1.10	76.2	1.16	76.7	1.16	
Current Residents from In-County		77.0								
Admissions from In-County, Still Residing	31.0	25.0	1.24	21.5	1.44	22.2	1.39	19.6	1.58	
Admissions/Average Daily Census	110.5	107.5	1.03	135.6	0.81	122.3	0.90	141.3	0.78	
Discharges/Average Daily Census	114.9	108.9	1.06	137.2	0.84	124.3	0.92	142.5	0.81	
Discharges To Private Residence/Average Daily Census	50.9	48.3	1.05	62.4	0.82	53.4	0.95	61.6	0.83	
Residents Receiving Skilled Care	87.0	93.7	0.93	94.8	0.92	94.8	0.92	88.1	0.99	
Residents Aged 65 and Older	96.5	88.4	1.09	94.5	1.02	93.5	1.03	87.8	1.10	
Title 19 (Medicaid) Funded Residents	68.7	66.9	1.03	71.9	0.96	69.5	0.99	65.9	1.04	
Private Pay Funded Residents	24.3	18.9	1.29	17.4	1.40	19.4	1.25	21.0	1.16	
Developmentally Disabled Residents	0.0	0.5	0.00	0.6	0.00	0.6	0.00	6.5	0.00	
Mentally Ill Residents	30.4	46.3	0.66	31.8	0.96	36.5	0.83	33.6	0.91	
General Medical Service Residents	33.0	16.7	1.98	21.1	1.57	18.8	1.76	20.6	1.61	
Impaired ADL (Mean)	52.0	47.8	1.09	47.6	1.09	46.9	1.11	49.4	1.05	
Psychological Problems	67.8	63.4	1.07	57.6	1.18	58.4	1.16	57.4	1.18	
Nursing Care Required (Mean)	8.7	7.3	1.19	7.8	1.12	7.2	1.21	7.3	1.19	